

EMPLOYER'S CONTRIBUTION QUARTERLY ADJUSTMENT REPORT (FOR AMENDED PURPOSES ONLY)

State Form 44954 (R4 / 5-11)

INDIANA DEPARTMENT OF WORKFORCE DEVELOPMENT

10 N SENATE AVE RM SE201 INDIANAPOLIS IN 46204-2277

Local: 317-232-7436 Toll Free: 1-800-437-9136 Fax: 317-233-2706

CONFIDENTIAL RECORD Pursuant to IC 22-4-19-6, IC 4-1-6

Employer Name _____ **Account Number** _____

Street Address _____ **Federal Number** _____

City, State, ZIP Code _____ Date Qtr. Ended _____

Telephone () _____ Tax Rate _____

UC-1	Gross Wages	Excess Wages	Taxable Wages	Contributions
Reported				
Corrected				
Difference				a.
		Interest: One percent (1%) per month x a		b.
		Penalty: Ten percent (10%) on contribution x a		c.
		Total Amount due to IDWD a + b + c = d		d.

Reason for Adjustment:

Signature

Date (mm/dd/yyyy)

*** Please See Reverse Side For Instructions ***

UC-5A

FOR OFFICE USE ONLY (GRAY SHADED AREA)

BATCH:

DOC:

Employer _____ Account No. _____ Quarter / Year _____

Social Security Number	Employee	Corrected Amount	Reported Amount	Difference More or (Less)
			TOTAL	

INSTRUCTIONS FOR AMENDED REPORTS

For UC-1:

1. Please fill in each heading line correctly. Failure to comply with this request may result in additional assessment of interest and penalty.
2. If you claim overpayment, no interest or penalty assessment is required. If you request a refund check on your overpayment, please write a refund request in space labeled Reason for Adjustment.
3. Please review all figures, calculations and sign the form before mailing. If you need assistance, please call Employer Account Maintenance at Local (317) 232-7436 Toll Free 1-800-437-9136 FAX (317) 233-2706.
4. Keep a copy for your records and send the original copy with signature and remittance (if required) to:

Attn: Employer Account Maintenance
Indiana Dept. of Workforce Development
10 N. Senate Avenue RM SE201
Indianapolis, IN 46204-2277

For UC-5A:

1. List only the employee or employees whose gross wages differ from the original report.
2. The total of column UC-5A is to equal the difference of UC-1 Gross Wages. Should the amount disagree, explain in a note why the difference.

EXAMPLE: The UC-1 was submitted correctly, however an employee's wages were omitted.

3. To change an incorrect Social Security Number, please list the reported Social Security Number and gross wages on one line and then submit the correct Social Security Number and gross wages on a second line.